2005 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State **DOCUMENT # F94000005639** 02-02-2005 90053 020 ***150.00 1. Entity Name PRESNELL ASSOCIATES, INC. Principal Place of Business Mailing Address 815 WEST MARKET ST 815 WEST MARKET ST LOUISVILLE, KY 40202 LOUISVILLE, KY 40202 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01042005 CR2E034 (10/03) Applied For City & State City & State 4. FEI Number 61-0865261 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PD TITLE ☐ Delete TITLE ☐ Change ■ Addition WRIGHT, WENDALL NAME NAME 6302 MAOCKINGBIRD VALLEY RD STREET ADDRESS STREET ADDRESS CITY-ST-7IP LA GRANGE, KY 40031 CITY-ST-7IP SONIOR VICE PROSIDENT **EVD** Delete ☐ Change **X**Addition TITLE TIT1 F DAVID J. REED NAME SINGLA, AMAR C NAME 815 West Market St. Suite 300 STREET ADDRESS 215 CAMBRIDGE STATION ROAD STREET ADDRESS CITY-ST-7IP LOUISVILLE, KY 40223 CITY-ST-ZIP VSAT ☐ Delete Change TITLE TITLE ☐ Addition NEWMAN, SUSAN M NAME STREET ADDRESS 815 W. MARKET STREET-SUITE 300 STREET ADDRESS CITY-ST-ZIP LOUISVILLE, KY 40202 CITY-ST-ZIP ☐ Delete ☐ Change TITLE TD TITLE Addition BURKHOLDER, DAVID M NAME 6902 CROSSBOW PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIF PROSPECT, KY 40059 CITY-ST-ZIP Delete Senior VICE President Addition EVD TITLE ☐ Change TITLE DAVID E. SMITH WRIGHT, DAVID W NAME NAME 815 NEST MAPLET St. Suite 300 STREET ADDRESS 8814 JUNIPER SPRINGS PLACE STREET ADDRESS CITY-ST-ZIP LOUISVILLE, KY 40242 CITY-ST-ZIP LOUISVILLE, KY 40207 Delete SVP ☐ Change Addition TITLE TITLE KELLY, GLEN M NAME STREET ADDRESS 815 W. MARKET STREET-SUITE 300 STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

PAVID M 3VEK NOLDSE

CITY-ST-ZIP

SIGNATURE:

LOUISVILLE, KY 40202

CITY-ST-7JP

THE AND THE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTO

4/05 502.585-22

FILED

Feb 02, 2005 8:00 am